Applicant	Larry Holmberg	RECEIVED
Serial No.	10/804,548	Central Fax Center
Filing Date	March 18, 2004	FACSIMILE JUL 0 2 2004
Group Art Unit	2612	TRANSMITTAL FORM
Examiner Name	Unassigned	TORY OF THE
Confirmation No.	7466	
Facsimile No.	703-872-9306	7
Attorney Docket No.	119.001US04	

## TOTAL PAGES: 3 pgs. (including cover sheet) TO CENTRAL FAX - (703) 872-9306

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Enclosures						
The following document is enclosed:  X A Supplemental Information Disclosure Statement (1 pg.), and Form 1449 (1 pg.).						
		Subm	itted By			
Name	Scott V. Lundberg	Reg.No.	41,958	Telephone	(612) 332-4720	
Signature		N	3-7/	Date	July 2, 2004	
P.O. Box Minneap T: 612-3 F: 612-3	oolis, MN 55458-1339 32-4720 32-4731 DMER NUMBER: 34206	rtificate o	f Transmiss	ion		
I certify that this paper, and the above-identified documents, are being transmitted by facsimile to,						
Facsimile No. 703-872-9306 of the United States Patent and Trademark Office on July 2, 2004.						
Name	Elizabeth A. Bauer		ature §	lipbettet.	Sour	

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Larry Holmberg	
10/804,548	SUPPLEMENTAL
March 18, 2004	INFORMATION
2612	DISCLOSURE
Unassigned	STATEMENT
119.001US04	
	10/804,548  March 18, 2004  2612  Unassigned

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In compliance with 37 C.F.R. §§ 1.56 and 1.97, et seq., the enclosed materials are brought to the attention of the Examiner for consideration in connection with the above-identified Application. Applicant respectfully requests that this Supplemental Information Disclosure Statement be entered and the references listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to MPEP §609, Applicant further requests that the Examiner initial next to each reference on the Form 1449 to indicate that the listed references have been considered. Applicant further requests that a copy of the initialed Form 1449 be returned with the next official communication.

Under 37 C.F.R. § 1.97(b)(3), it is believed that no fee or certificate is required with this Supplemental Information Disclosure Statement. However, if an Office Action on the merits has been mailed, the Commissioner is hereby authorized to charge any fees deemed necessary or credit any overpayment to Deposit Account No. 502432.

The Examiner is invited to contact the Applicant's Representative at the below-listed telephone number if there are any questions regarding this communication.

Respectfully submitted,

Date: 7-1-4

Attorneys for Applicant Fogg & Associates, LLC

P.O. Box 581339 Minneapolis, MN 55458-1339

T: 612-332-4720 F: 612-332-4731 Scott V. Lundberg Reg. No. 41,958

Applicant(s)	Larry Holmberg	
Scrial No.	10/804,548	SUPPLEMENTAL
Filing Date	March 18, 2004	INFORMATION DISCLOSURE
Group Art Unit	2612	1 :
Examiner Name	Unassigned	STATEMENT
Attorney Docket No.	119.001US04	FORM PTO-1449
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Title: CAMERA LEN	S AND DISPLAY	O 1 . 51
		Sheet 1 of 1

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	NONE					<u> </u>

Other References				
Examiner Initials	Author, Title, Date, Pages, etc.			
	NONE			

Examiner	Date				
Signature	Considered				
*Exemples Initial if citation considered, whether or not citation is in conformation	nce with MPEP 60	9; Draw line through citation if not			
in conformance and not considered. Include copy of this form with next communication to applicant.					